FEC

STATEMENT OF

FORM 1	ORGANIZATION	
	(See instructions)	Office use only
1. NAME OF COMMITTEE (in f	ull) (Check if name Example: If typying, type over the lines	12FE4M5
Speak Out For	America PAC	
ADDRESS (number and s	rreet) PO Box 83	
(Check if address is changed)		
	Alexandria	VA 22313 - 1
	CITY▲	STATE▲ ZIP CODE ▲
COMMITTEE'S E-MAII	ADDRESS (Please provide only one e-mail address)	
(Check if address	aholm@mindspring.com	
is changed)		
COMMITTEE'S WEB F	PAGE ADDRESS (URL)	
(Check if address is changed)	http://speakoutforamerica.com/	
2. DATE 0 6	/ D D / Y Y Y Y Y Y Y Z 0 1 1	
3. FEC IDENTIFICA	TION NUMBER C C00488510	
		_
4. IS THIS STATEM	ENT X NEW (N) OR AMENDED (A)	
I certify that I have examin	ned this Statement and to the best of my knowledge and belief it is true, correc	and complete
Type or Print Name of	Freasurer Anthony Holm	
Signature of Treasurer	Electronically Filed by Anthony Holm	Date 06 / 20 / Y Y Y Y Y
NOTE: Submission of fals	se, erroneous, or incomplete information may subject the person signing this S ANY CHANGE IN INFORMATION SHOULD BE REPORTE	
Office Use Only	For further information Federal Election Community Toll Free 800-424-953	nission FEC FORM 1